

EU collaboration on cross-border long-term care at the ILPN conference 2012

By Lisa Trigg and Helen Vieth



Experts from 13 European institutions with extensive experience in the field of European health policy came together in 2010 to work on the EC/FP7-funded [European Union Cross-border Care Collaboration \(EUCBCC\)](#) project, which runs until October 2013.

Taking as a starting point the [Directive on Patients' Rights](#) and the existing body of research on cross-border care, we looked at where necessary information is missing and sought to fill in the gaps in our knowledge of the everyday workings of health systems and whether they are mutually compatible. Our aim is to facilitate a process whereby Europe's citizens can make informed choices about whether to seek health care in another Member State, and if they so choose, to ensure that the administrative and clinical processes are straightforward and ensure continuity of care.

We also explore the challenges for those seeking and providing long-term care (LTC), particularly social care for older people, in different Member States; findings from our work on LTC are being presented in an organised session at the [2nd International Conference and Evidence-based Policy in Long-Term Care](#) on 7 September 2012.

Long-term care in EU Member States

The future challenges for governments in providing long-term care are well-documented. Across EU Member States, the old age dependency ratio – or the population aged 65 or over compared to that aged 20-64 – is projected to rise from 28% in 2010 to 59% in 2060. The number of 'oldest old', in this case those aged 80 and over, is set to triple in the same period (European Commission 2010).

A number of reforms are therefore being applied across many European countries in order to improve the sustainability and responsiveness of long-term care systems, including introducing mechanisms to provide service users with choice, and an emphasis on avoiding the need for institutional care. To support this, [public reporting of quality information](#) has been promoted as a

way to support users to make informed decisions on long-term care. Public reporting can also generate user-driven pressure on providers to improve the quality of their services. Our work in this area has focused on comparing user and provider behaviour both within countries and when seeking and providing care across borders, with a strong emphasis on the role played by public reporting of quality indicators. We will be exploring results from this work in our session at ILPN 2012, *Exploring quality information and its impact on user choice and provider behaviour in residential care across six European countries*.

Within our session:

Ricardo Rodrigues and Andrea Schmidt are presenting on the results of an exercise to map the public reporting of quality across all six participating countries. Using secondary literature and input from national experts, we critically assessed the public reporting mechanisms established alongside quality assurance in England, Germany and the Netherlands, as well as smaller scale and pilot initiatives undertaken in Austria, Finland and Spain. Research from the United States was used for comparison to supplement the relatively limited body of evidence which exists in Europe. We applied the quality improvement framework developed by Berwick and colleagues (2003) to evaluate these approaches in terms of their impact on the choice of providers (the selection pathway) and on adjustments in provider behaviour (the change pathway).

Jacquetta Holder and Stephanie Kumpunen are discussing results from a study of how users choose residential care. The public reporting of quality information is being promoted in many countries as a means to support consumers to make informed decisions about care providers. We examined the selection process in England, the Netherlands and Spain, along with the understanding and preferences for different types of quality information. The first stage of this work involved semi-structured and in-depth interviews with social care professionals and residential care providers. Ricardo and Andrea's presentation will feature preliminary findings from England and will include an overview of the context of user choice in the residential care market.

Kai Leichsenring is focusing on providers, and specifically on how quality information is used to inform and support – or act as barriers to – entry for organisations that provide care in different EU Member States, in this case German providers operating in Austria. . The analyses examined two key themes: the effect of regulation and public reporting in the decision of German providers to relocate or establish new operations in Austria, and the ways in which public reporting may be used for benchmarking and for the promotion of residential homes to consumers and purchasers. Kai will discuss findings from semi-structured interviews with German care home providers and Austrian public officials involved in tendering and/or procurement

For more information please contact [Lisa Trigg](#), Research Officer at LSE Health, who is leading the EUCBCC project's work on long-term care and will be chairing this session at the ILPN conference on 7 September 2012.

For more information on the EUCBCC project please contact the Project Manager, [Helen Vieth](#), at LSE Health.

References

Berwick DM, James B, Coye MJ (2003) Connections between quality measurement and improvement, *Medical Care*, 41, 130-138.

European Commission (2010) *Demography Report 2010. Older, More Numerous and Diverse Europeans*, DG Employment, Social Affairs and Inclusion, Eurostat.